UTILITY PATENT APPLICATION

Name:

Attorney Docket No. 241757US6

Registration No.:

PATENT APPLICATION First Inventor or Application Identifier Peter MAIER, et al.									
TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	77 CFR 1.53(b)) Title TABLE WITH FOLD-AWAY LEGS								
		Sedus Stoll AG Brueckenstrasse 15,	79761 Waldshut-Tiengen	, Germany	32.5				
APPLICATION ELEMEN See MPEP chapter 600 concerning utility patent to		Commissioner for Patents ADDRESS TO: Mail Stop Patent Application Alexandria, Virginia 22313							
1. Fee Transmittal Form (e.g. PTO/St (Submit an original and a duplicate for fee pro	ACCOMPANYING APPLICATION PARTS								
(Submit an original and a duplicate for fee pri	7. Assignment Papers (cover sheet & document(s))								
2. Specification Total	Sheets 10	8. Application	n Data Sheet. See 37	CFR 1.76					
		9. 37 C.F.R. (when there	§3.73(b) Statement is an assignee)	☐ Power of Attorney					
3. Drawing(s) (35 U.S.C. 113) Total	Sheets 7	10. ☐ English T	ranslation Document (•					
		11. Information Statement	on Disclosure at (IDS)/PTO-1449	☐ Copies of Citations					
4. Oath or Declaration Total	Pages	12. 🗌 Prelimina	ry Amendment						
a. Newly executed (original or c	ору)		vance Serial No. Posto		[
b. Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with box 17 completed) 14. Certified Copy of Priority Document(s) (1)									
 DELETION OF INVENT Signed statement attached de the prior application, see 37 C 1.33(b). 	leting inventor(s) named in	15. Applicant See 37 CFF	claims small entity sta	tus.					
5. CD-ROM or CD-R in duplicate, large Program (Appendix)	ge table or Computer	16. Other :	Request for Priority						
 6. Nucleotide and/or Amino Acid Seq (if applicable, all necessary) a. Computer Readable Form (CR) b. Specification or Sequence Listing of it. CD-ROM or CD-R (2 copies) 	RF) on :								
ii. 🔲 Paper									
c. Statements verifying identity o	f above copies	<u></u>							
17. If a CONTINUING APPLICATION, check									
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application no.: Prior application information: Examiner: Group Art Unit:									
For CONTINUATION OR DIVISIONAL APPS only: The considered a part of the accompanying continuation or d when a portion has been inadvertently omitted from the	entire disclosure of the prior		an oath or declaration is supp	olied under Box 4b,					
18. Amend the specification by inserting before	_								
☐ This application is a ☐ Continuation	Division	☐ Continuation-i	n-part (CIP)						
of application Serial No. Filed on ☐ This application claims priority of provisional application Serial No. Filed									
This application dains priority of provis	19. CORRESPONE		1 1100		——				
	228 (703) 41 FACSIMILE: (7	350 13-3000							
		<u> </u>							
Name: Gregory J. Maier	1: 10000		Registration No.: 2:						
Signature:	16/m) M64	relled	Date:	8/20/0	3				

241757US6

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

VENTOR(S) Peter MAIER, et al.

SERIAL NO:

New Application

FILING DATE: Herewith

FOR:

TABLE WITH FOLD-AWAY LEGS

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED				NUMBER EXTRA	RATE			CALCULATIONS
TOTAL CLAIMS	8	-	20	=	0	х	\$18	=	\$0.00
INDEPENDENT CLAIMS	1	-	3	=	0	х	\$84	=	\$0.00
☐ MULTIPLE DEPENDENT CLAIMS (If applicable) + \$280 =								\$0.00	
LATE FILING OF DECLARATION							\$130	=	\$130.00
BASIC FEE									\$750.00
TOTAL OF ABOVE CALCULATIONS									\$880.00
☐ REDUCTION BY 50% FOR FILING BY SMALL ENTITY								\$0.00	
☐ FILING IN NON-ENGLISH LANGUAGE						+	\$130	=	\$0.00
☐ RECORDATION OF ASSIGNMENT						+	\$40	=	\$0.00
							TOTA	٩L	\$880.00

- ☐ Please charge Deposit Account No. 15-0030 in the amount of \$0.00 A duplicate copy of this sheet is enclosed.
- A check in the amount of \$880.00 to cover the filing fee is enclosed.
- Credit card payment form is attached to cover the filing fee in the amount of \$0.00
- The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment form is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

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8/20/03

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